



VIRGINIA CENTER FOR THE CREATIVE ARTS

Employment Application
 154 San Angelo Drive, Amherst, VA 24521

APPLICANT INFORMATION

Last Name		First	M.I.	Date
Street Address			Apartment/Unit #	
City		State	ZIP	
Phone		E-mail Address		
Date Available	Social Security No.		Desired Salary	
Position Applied for				
Are you a citizen of the United States?		<input type="checkbox"/> YES <input type="checkbox"/> NO	If no, are you authorized to work in the U.S.?	
			<input type="checkbox"/> YES <input type="checkbox"/> NO	
Have you ever worked for VCCA?		<input type="checkbox"/> YES <input type="checkbox"/> NO	If so, when?	
Have you ever been convicted of a felony?		<input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, explain	

EDUCATION

High School		Address
Did you graduate?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Degree
College		Address
Did you graduate?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Degree
Other		Address
Did you graduate?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Degree

REFERENCES *Please list three professional references.*

Full Name		Relationship
Company		Phone ()
Address		
Full Name		Relationship
Company		Phone ()
Address		
Full Name		Relationship
Company		Phone ()
Address		

PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? <input type="checkbox"/> YES <input type="checkbox"/> NO			
MILITARY SERVICE			
Branch		From	To
Rank at Discharge		Type of Discharge	
If other than honorable, explain			
DISCLAIMER AND SIGNATURE			
I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. I agree to conform to the rules and regulations of VCCA and I understand that employment at VCCA shall be at will and shall be terminable at will by the organization or the employee with or without cause. VCCA hires only U.S. citizens and aliens lawfully authorized to work in the United States. All new employees will be required to complete an Employment Verification (Form I-9) and present satisfactory evidence of identity and employment eligibility. I hereby authorize VCCA to contact previous employers and references and to make any necessary investigation of my personal history.			
Signature		Date	

Equal Employment Opportunity Statement: Employment decisions will be based on the principles of equal opportunity. All personnel actions (recruiting, hiring, training, promotion, compensation, etc.) are administered without regard to any characteristic protected by state, federal, or local law, assuming said characteristic does not interfere with the performance of essential job functions. Reasonable accommodations will be made for disabilities and religious beliefs. Please inform us of any necessary accommodations to the application process.